Vanguard Process

Enhancing value, relevance and agility for Navy Medicine in the Maritime and Expeditionary Environments

February 2009

Vanguard

Vanguard Mission:

- Identify and prioritize Naval Medicine capability gaps, requirements, and emergent needs for next generation Force Health Protection and Expeditionary Medicine.
- Provide validated capability gaps for high-level investment strategy in support of Navy Medicine's strategic goals and research for operations readiness, military health care, and health promotion.

Vanguard 2009 Goals:

- Review / analyze identified Joint Force Health Protection (JFHP) capability gaps.
- Identify any new emerging operational gaps from Navy Warfighter perspective
- Review lessons learned for additional capability gaps.
- Prioritize gaps within each JFHP Capability area from Navy Warfighter perspective.
- Create overall first 10 action list.
- Agree on follow-on processes to include tracking & reporting requirements.

ID, validate & prioritize broad set of capabilities required

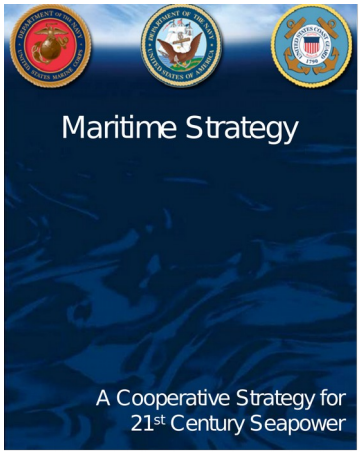
Drive for value, relevance, & agility

- National Maritime Strategy
- CNO/Commandant's Guidance
- Naval Enterprise Provider Role
- SG's Strategic Plan
- BRAC's Push for Collocation & Consolidation
- Joint/Common Focus

National Maritime Strategy

Core capabilities of Maritime power:

- Forward Presence
- Deterrence
- Sea Control
- Power Projection
- Maritime Security
- Humanitarian Assistance & Disaster Response



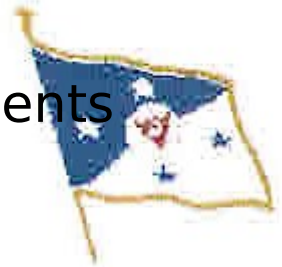
From CNO Guidance 2009

Guidance:

- We must leverage science and technology initiatives to ensure warfighting benefits accrue to future Sailors.
- Our S&T investments must address warfighting gaps and improve our effectiveness and efficiency.
- Our S&T investments must deliver products that transition affordably to Fleet operators within a timeframe that maximizes their value.
- In pursuit of new technologies, we must practice appetite suppression: technology can deliver great capability, but we can only afford to invest in capabilities we absolutely need.

Key Measures:

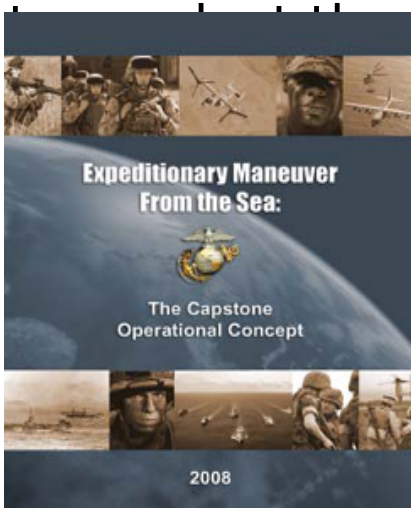
- Warfighting value and relevance of S&T investments
- Agility of S&T transitions from development to acquisition to operation



USMC Capstone Concept

Central Idea:

- Defeating Hybrid threats and challenges
- Enhancing the MAGTF's flexibility, agility, and adaptability
- Enabling Marines to think faster, decide faster, act decisively
- Increase the ability of the rifle company [illegible] full range of missions



Imperatives:

- Seabasing
- Persistent forward presence and engagement
- Agile and adaptable forces
- Multicapable across the ROMO

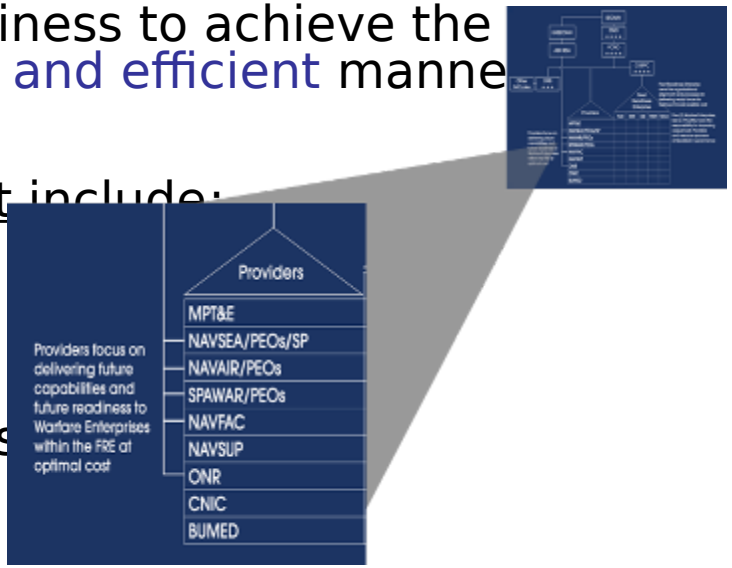
Navy Enterprise

Key methods to improve ROI are:

- Improving the output/cost ratio associated with all major processes
- Aligning and resourcing our lines of business to achieve the intended outcome in the most effective and efficient manne

Responsibilities of Enterprise management include:

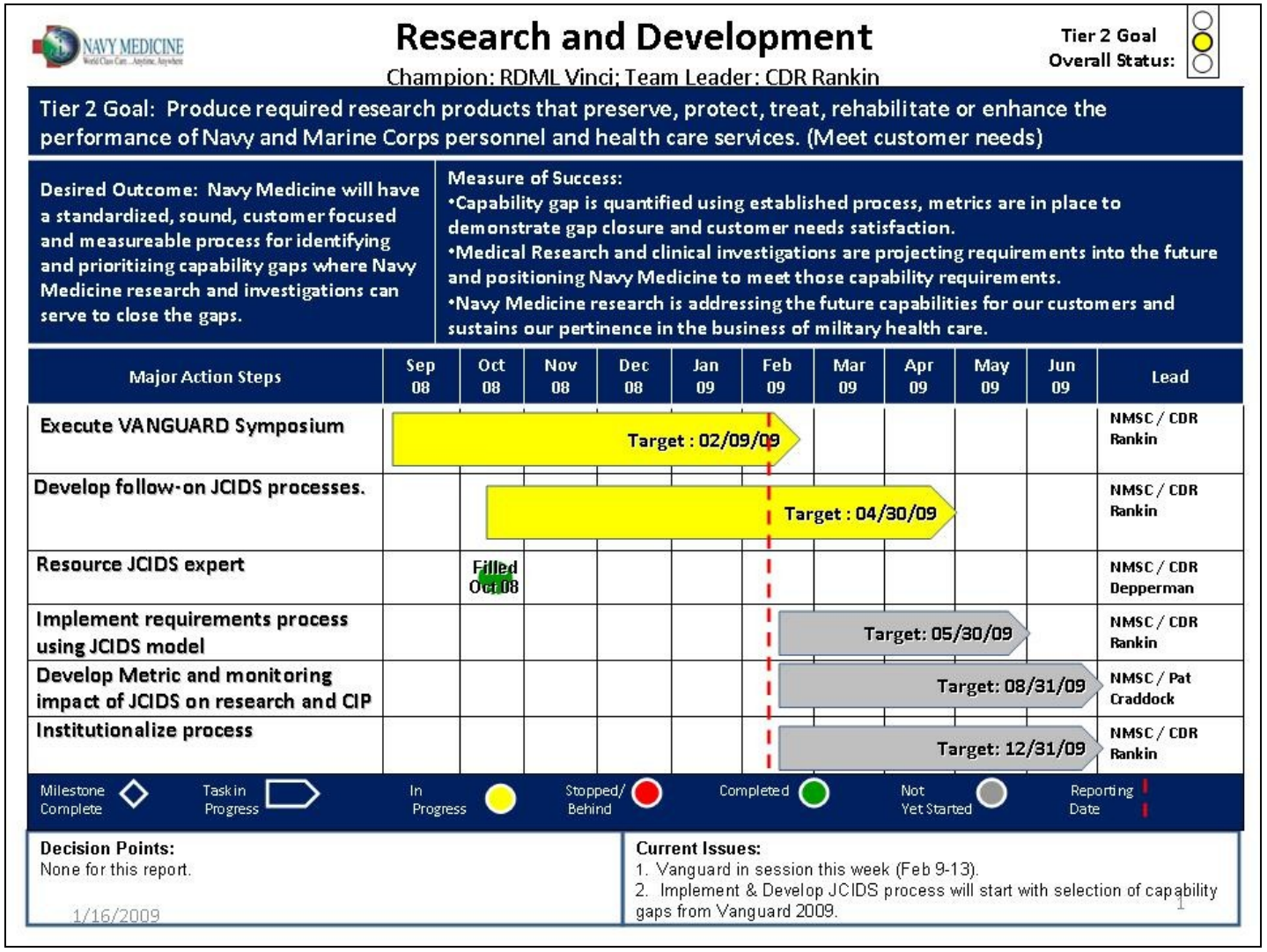
- Setting enterprise objectives
- Assessing progress
- Removing barriers
- Making decisions (per vested authorities



Medicine as a Provider:

- works together (with other Providers) to deliver future capabilities and support current readiness to the Warfare Enterprises at the best cost.

SG's Strategic Plan



NAVY MEDICINE

Research and Development

Champion: RDML Vinci; Team Leader: CDR Rankin

Tier 2 Goal Overall Status:

Tier 2 Goal: Produce required research products that preserve, protect, treat, rehabilitate or enhance the performance of Navy and Marine Corps personnel and health care services. (Meet customer needs)

Desired Outcome: Navy Medicine will have a standardized, sound, customer focused and measureable process for identifying and prioritizing capability gaps where Navy Medicine research and investigations can serve to close the gaps.

Measure of Success:
- Capability gap is quantified using established process, metrics are in place to demonstrate gap closure and customer needs satisfaction.
- Medical Research and clinical investigations are projecting requirements into the future and positioning Navy Medicine to meet those capability requirements.
- Navy Medicine research is addressing the future capabilities for our customers and sustains our pertinence in the business of military health care.

Major Action Steps	Sep 08	Oct 08	Nov 08	Dec 08	Jan 09	Feb 09	Mar 09	Apr 09	May 09	Jun 09	Lead
Execute VANGUARD Symposium	Target : 02/09/09										NMSC / CDR Rankin
Develop follow-on JCIDS processes.		Target : 04/30/09									NMSC / CDR Rankin
Resource JCIDS expert		Filled Oct 08									NMSC / CDR Depperman
Implement requirements process using JCIDS model						Target: 05/30/09					NMSC / CDR Rankin
Develop Metric and monitoring impact of JCIDS on research and CIP						Target: 08/31/09					NMSC / Pat Craddock
Institutionalize process						Target: 12/31/09					NMSC / CDR Rankin

Milestone Complete | Task in Progress | In Progress | Stopped/ Behind | Completed | Not Yet Started | Reporting Date

Decision Points:
None for this report.

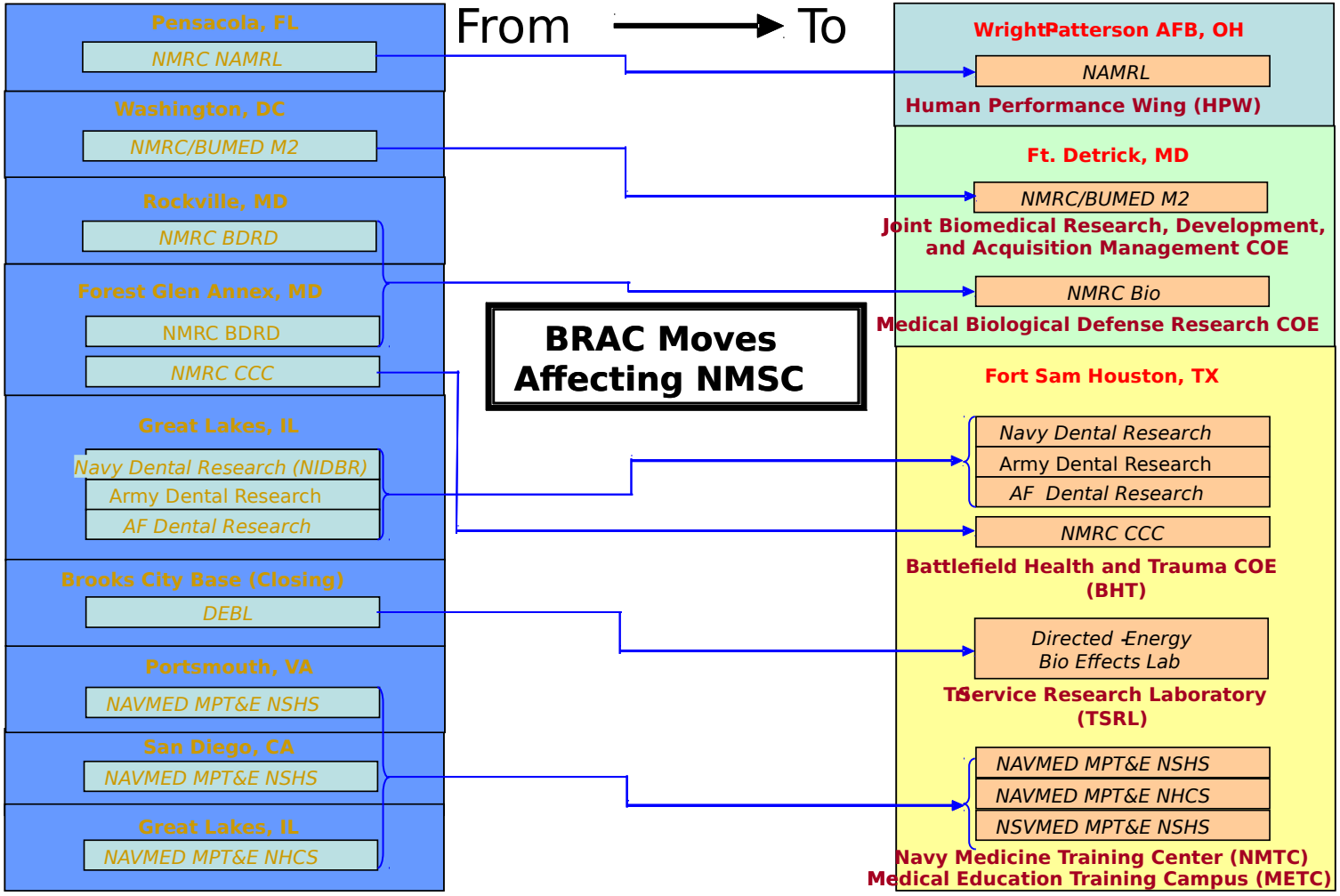
1/16/2009

Current Issues:
1. Vanguard in session this week (Feb 9-13).
2. Implement & Develop JCIDS process will start with selection of capability gaps from Vanguard 2009.

1

Build a standardized, sound, customer focused & measurable process

BRAC accelerating Jointness



Achieving value, relevance & agility

- NAVMED needs a deliberate and standardized “Requirement to Solution” process:
  - The process must include myriad of on-ramps that satisfy warfighter and clinical needs
  - The process must define value & relevance and enable agility & adaptability
  - The process must enhance ability to support current readiness and deliver future capabilities
  - The process must be multi-capable and contiguous to the joint arena

JCIDS - the Joint Process

Requirements Generation System (RGS)- ~30 years of experiences

Partially Interoperable Capabilities

Late Integration

Services Build Systems

Service Experimentation, Assessment & Analysis, Validation, Selection of Solutions

Service Unique Strategic Visions and Requirements

Joint Capabilities Integration and Development System (JCIDS)- 2+ years old

Strategic Direction

Joint Warfighting Concept Development

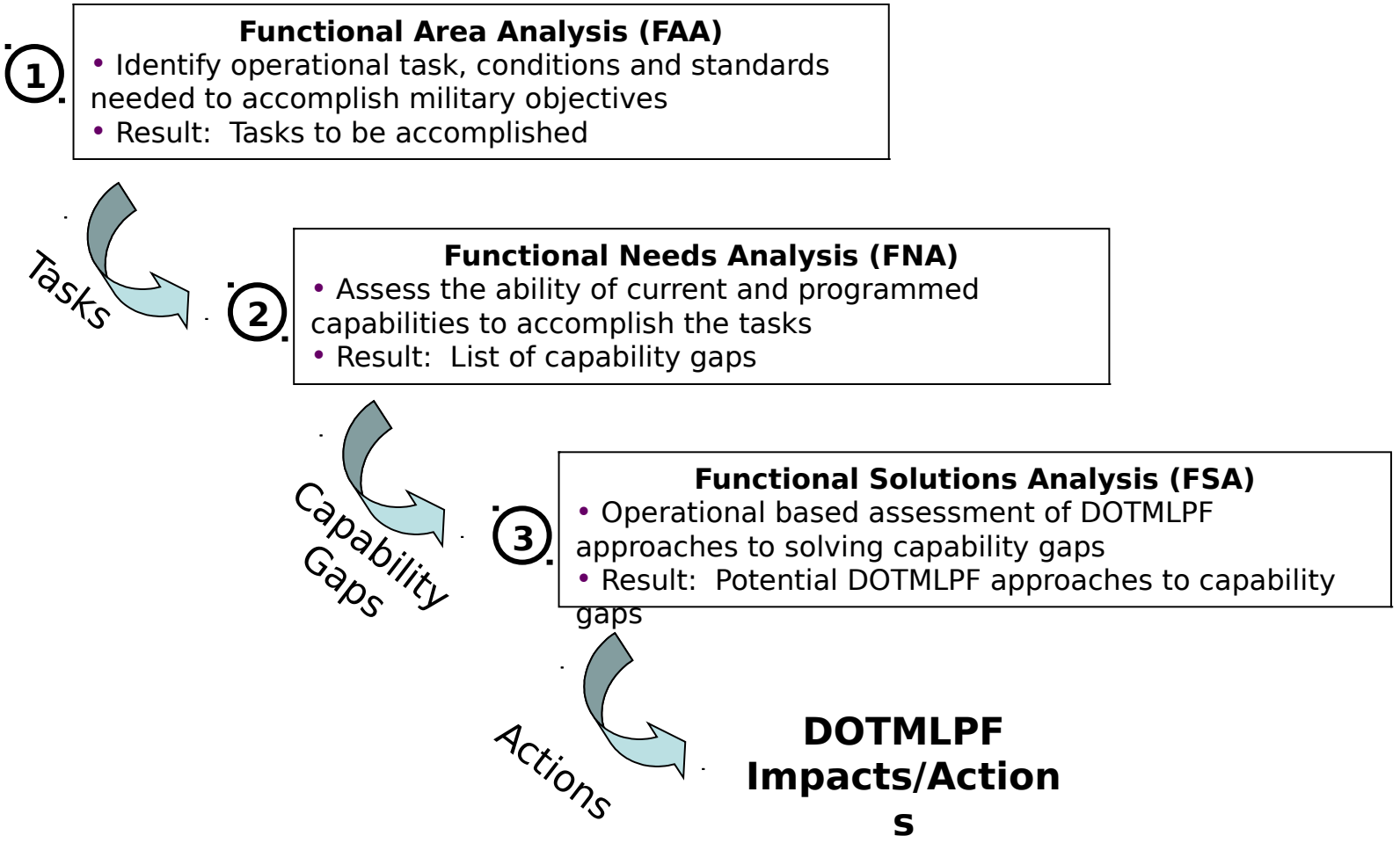
Joint Experimentation, Assessment & Analysis, Validation, Selection of Solutions

Services, COCOMs

Joint Capabilities

From bottom-up to capabilities-based construct

JCIDS Analysis Process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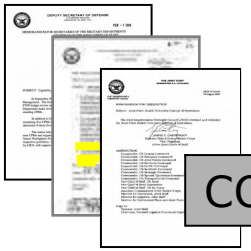
Functional Area Analysis (FAA)
• Identify operational task, conditions and standards needed to accomplish military objectives
• Result: Tasks to be accomplished
Tasks
2
Functional Needs Analysis (FNA)
• Assess the ability of current and programmed capabilities to accomplish the tasks
• Result: List of capability gaps
Capability Gaps
3
Functional Solutions Analysis (FSA)
• Operational based assessment of DOTMLPF approaches to solving capability gaps
• Result: Potential DOTMLPF approaches to capability gaps
Actions
DOTMLPF Impacts/Actions

Requirements drive Capabilities that result in Solutions

NAVMED Capability Development

Strategic Guidance



CONOPS

JOpsC

CBA Steps where Navy Medicine can affect requirements:

- Develop relevant concept "what do I want to do" and "what have we learned (Vanguard & NOMLLS)"
- Functional Area Analysis "what do I need to do it"
- Functional Needs Analysis "How well will I do"
- Functional Solutions Analysis "How do I improve it"

Capability Based Assessment

FAA

FNA

FSA

JCD

Congressional / DHP / Special Interest

Oversight Council Recommendations
-Capability Needs
-DOTMLPF Changes

Joint Requirement

DCR Implementation

Service Policy Change

Service Specific

PPBES

POM

Science & Technology

Acquisition

Experimentation

Focus on the operational capabilities needed

Refs:
CJCSM 3170.01C
BUMEDINST 5430.8
Navy Medicine Strategic Goals 08

NAVMED POA&M

- Capability Identification ⇒ Build on ramps to NAVMED
  - Requiring Activity
- Capability Cataloging/ Gatekeeping ⇒ Define & resource CDC
  - Capability Development Center (CDC)
- Capability Development/Integration ⇒ Process Roles & Responsibilities and Action Officer SOP's
  - BCA (FAA, FNA, FSA)
  - ICD
  - DOTMLPF
  - PPBES/POM
- Governance ⇒ NAVMED ROC
- Execution ⇒ Policy & Resources

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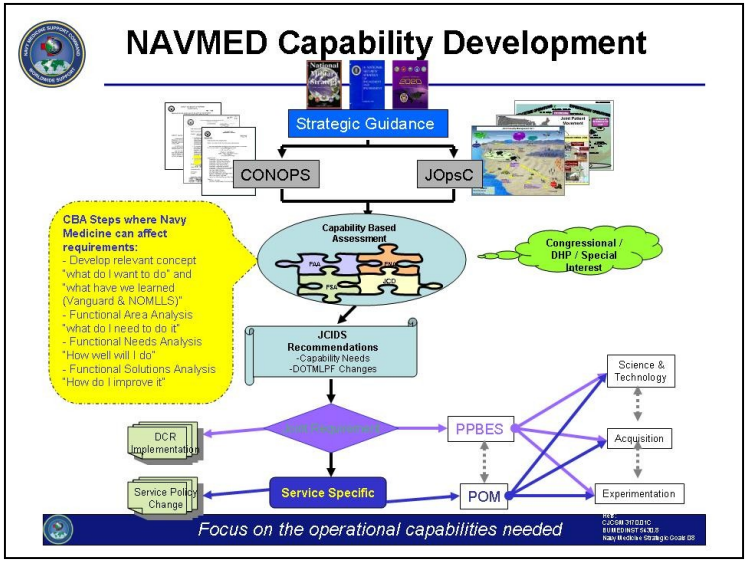
Questions?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Comments?

Thank-you for your inputs

Bibliography

- Ref(s):
  - Joint Capabilities Integration and Development System (CJCSM 3170.01F, May 2007)
  - Joint Force Health Protection Concept of Operations (V 1.0 July 2007)
  - CNO's Guidance for 2009 (November 2008)
  - USMC's Expeditionary Maneuver from the Sea: The Capstone Operational Concept, 2008
  - Navy Enterprise Website (http://www.navyenterprise.navy.mil)
  - Navy Surgeon General's Strategic Plan
  - Vanguard (http://nmsc.med.navy.mil/www/nmsc/Vanguard)

- POC's:
  - Dr. Keith Prusaczyk, NMRC (keith.prusaczyk@med.navy.mil)
  - CDR Steve Rankin, NMSC (steven.rankin@med.navy.mil)
  - Mr. Paul Talwar, Booz Allen Hamilton (paul.talwar.ctr@med.navy.mil)